24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Right to Rise USA	
	C C00571372
Check if 24-hour report	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
The Stoneridge Group	11 09 2015
Mailing Address 4400 North Point Parkway	
Suite 190	Amount
City State Zip Code	60111.65
Alpharetta GA 30022	Transaction ID: 001 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Postage Category/ Type 004	11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Jeb Bush Oppose	President Senate State: SC
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: X Primary General
Tel Election for Office Sought	Other (specify) >
Full Name of Payee The Stoneridge Group	Date of Public Distribution/Dissemination
Mailing Address 4400 North Point Parkway	11 09 2015
Suite 190	Amount
City State Zip Code	42329.23
Alpharetta GA 30022	Transaction ID: 002 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Production Category/ 004	M M / D D / Y Y Y
Type Type	11 05 2015
	e Sought: House District:
Jeb Bush Oppose	President Senate State: SC
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	102440.88
(b) SUPTOTAL of Uniterprized Independent Expanditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •
Charles R. Spies [Electronically Filed] Date 1	1 11 2015
Signature	